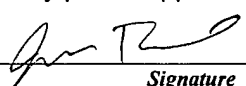


2461

<b>AMENDMENT TRANSMITTAL LETTER (Small Entity)</b>				<b>Docket No.</b> T3491-908130	
<b>Applicant(s):</b> Katrina L. DEWAR					
<b>Serial No.</b> 09/878,245	<b>Filing Date</b> APR 10 2003 June 12, 2001	<b>Examiner</b>		<b>Group Art Unit</b> 2161	
<b>Invention:</b> <b>COMPUTER-IMPLEMENTED SYSTEM FOR HUMAN RESOURCES MANAGEMENT</b>					
<u>TO THE ASSISTANT COMMISSIONER FOR PATENTS:</u>					
Transmitted herewith is an amendment in the above-identified application.					
<input type="checkbox"/> Small Entity status of this application has been established under 37 CFR 1.27 by a verified statement previously submitted.					
<input type="checkbox"/> A verified statement to establish Small Entity status under 37 FR 1.27 is enclosed.					
The fee has been calculated and is transmitted as shown below.					
<b>CLAIMS AS AMENDED</b>					
	<b>CLAIMS REMAINING AFTER AMENDMENT</b>	<b>HIGHEST # PREV. PAID FOR</b>	<b>NUMBER EXTRA CLAIMS PRESENT</b>	<b>RATE</b>	<b>ADDITIONAL FEE</b>
TOTAL CLAIMS	3 -	20 =	0 x	\$9.00	\$0.00
INDEP. CLAIMS	3 -	3 =	0 x	\$42.00	\$0.00
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>					\$0.00
<b>TOTAL ADDITIONAL FEE FOR THIS AMENDMENT</b>					\$0.00
<div style="float:right; text-align:right; border: 1px solid black; padding: 5px; transform: rotate(-10deg);"><b>RECEIVED</b> APR 15 2003 <b>GROUP 3600</b></div> <div><input checked="" type="checkbox"/> No additional fee is required for amendment.</div> <div><input type="checkbox"/> Please charge Deposit Account No. _____ in the amount of _____ A duplicate copy of this sheet is enclosed.</div> <div><input type="checkbox"/> A check in the amount of _____ to cover the filing fee is enclosed.</div> <div><input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account No. 50-1165 A duplicate copy of this sheet is enclosed.</div> <div><input checked="" type="checkbox"/> Any additional filing fees required under 37 C.F.R. 1.16.</div> <div><input checked="" type="checkbox"/> Any patent application processing fees under 37 CFR 1.17.</div> <div style="margin-top: 20px;"><div style="display: inline-block; width: 40%; text-align: center;"> _____ <i>Signature</i></div><div style="display: inline-block; width: 55%; vertical-align: bottom;">Dated: April 10, 2003</div></div> <div style="margin-top: 20px;"><div style="width: 45%;"><b>James T. Carmichael, Reg. No. 45,306</b> <b>Miles &amp; Stockbridge P.C.</b> <b>1751 Pinnacle Drive, Suite 500</b> <b>McLean, VA 22102</b> <b>(703) 903-9000</b></div><div style="border: 1px solid black; padding: 5px; width: 50%; margin-left: 10px;"><div>I certify that this document and fee is being deposited on _____ with the U.S. Postal Service as first class mail under 37 C.F.R. 1.8 and is addressed to the Assistant Commissioner for Patents, Washington, D.C. 20231.</div><div style="border-top: 1px solid black; height: 20px; margin-top: 10px;"></div><div style="border-top: 1px solid black; height: 20px; margin-top: 10px;"></div><div style="border-top: 1px solid black; height: 20px; margin-top: 10px;"></div></div></div> <div style="margin-top: 20px;"><div>CC:</div><div style="border: 1px solid black; padding: 5px; width: 35%; margin-left: 10px;"><div style="border-top: 1px solid black; height: 20px; margin-top: 10px;"></div><div style="border-top: 1px solid black; height: 20px; margin-top: 10px;"></div><div style="border-top: 1px solid black; height: 20px; margin-top: 10px;"></div></div></div>					